2005 REGIONAL ANNUAL SOLID WASTE REPORT

For the Period January through December 2005

Please return your completed form by March 31, 2006 to:

Hank Tyler, Senior Planner Waste Management & Recycling Program Maine State Planning Office Augusta, Maine 04333-0038

{or file electronically at www.recyclemaine.com}

(Please refer to the enclosed Instructions and Guidelines as you complete this form)

If you need assistance in completing this form, please contact Hank Tyler at 1-800-662-4545

Reporting region:	
Municipalities in region:	
A. CONTACT PERSON:	Phone:
Title: F	E- mail:
Address:	
City/Town:	State: Zip Code:
B. TRANSFER STATION MANAGER:	
Address:	Phone:
E-mail:	Cell phone:
C. RECYCLING COORDINATOR:	
Address:	Phone:
D. Recycling Committee Chair:	Phone:
Address:	
Signature of person completing this form	
Printed name of person completing this form _	
Which region or community (ies) are you ass	sociated with for (MSW) Disposal Services?
Which recycling center, region or communit	y (ies) are you associated with for Recycling Services?

The information requested in this form is similar to past years; however, this year's form provides additional space in order to facilitate reading and completing the form.

PLEASE COMPLETE THE FORM, WITH INFORMATION ON YOUR REGIONAL MUNICIPAL SOLID WASTE (MSW) PROGRAM, FOR THE YEAR 2005:

SECTION 1 NONBULKY MSW DISPOSAL Tons (actual only) **Facility Used** Landfilled Waste to Energy facility Total Nonbulky MSW Disposed Do disposal figures include all commercially generated waste in your community? YES ___ NO ___ **SECTION 2** NONBULKY MSW RECYCLABLES MANAGED (See Guidelines for Reporting Materials, page 2 of the instructions) Tons (actual only) **Broker/End-User Office Paper Corrugated Cardboard (OCC) Newspapers (ONP) Magazines (OMG) Mixed Paper Grades Clear Glass (Flint) Green Glass Brown Glass (Amber) Aluminum Cans/Foil Tin Cans** HDPE (#2 plastic) PET (#1 plastic) Other Plastic(s) Other Materials (please list): YES NO Do recycling figures include commercially generated recyclables?

YES____ NO____

If you are the host community for a recycling region, but reporting as a single municipality, are any

of the recyclable tonnages listed above from another municipality?

If yes, how many tons? _____

SECTION 3 RE	EUSE (Se	ee Instructions,	page 2.)	
Reuse opportunities for 'or 'casual program' at a			nanaged through a 'Swap sh	op/bargain barn'
Tons B	Estimated? Yes	_ No 1	U se a Building? Yes _	No
SECTION 4 CO	OMMERCIAL WA	STE DISPO	SAL AND RECYCLIN	<u>\l</u> G
	(Se	ee Instructions,	page 2 & 3.)	
Commercial MSW	V Disposal (in addition	on to the MSW	tons reported in Section #1)	1
Tons (actual o	only)	Facility/	Hauler	
Commercial Recy DO NOT inclu		-	orted in Section # 2) anufacturing businesses	
Material (please identify)	Tons (actual only)	Source	Broker or End-User	

SECTION 5 BULKY WASTE DISPOSAL AND RECYCLING

<u>Please</u> indicate if any of these materials are also included in **other Sections**. (See *Instructions*, page 3.) **Please report data in tons.**

<u>Material</u>	Landfilled	Incinerated	Incinerated for Energy Recovery	Recycled	<u>Facility or</u> <u>Broker/End-User</u>	
Metals	XXX	XXX	XXX			
Leaf & Yard			XXX			
Tires	XXX		XXX		<u> </u>	
CDD						
Wood Waste						
Furniture/Oversized	d		XXX			
Mixed Bulky waste	es		XXX			
SECTION 6 REGIONAL COMPOSTING EFFORTS (See Instructions, pages 3 & 4) REGIONAL PROGRAM Tons (actual or estimated?) Food Waste						
Other Organics?						
BACKYARD COMPOSTING - CREDITS (See Instructions, page 3 & 4.) Do you have a backyard compost education program? YES NO (Must attach sample of flyer/media, to receive this credit) Do you ban disposal of yard/leaf waste? YES NO Do you collect and compost yard/leaf waste? YES NO						
What percentage of households has a backyard compost pile?% (Must attach copy of survey that was conducted)						
What percentage of	households re	eceived a backyar	rd compost bin in 2005	??% t	pefore 2005?%	

SECTION 7 TOXICS IN MSW MANAGEMENT

(See *Instructions*, page 4)

<u>IDENTIFY AND NAME</u> where you direct your *<u>residents</u>* to deliver these products:

Product	Municipal Facility	Regional <u>Facility</u>	Collection <u>Event</u>	Curbside Collection	<u>Private</u> <u>Consolidator</u>
Fluorescent lamps					
Mercury Devices*					
TVs, computer monitors**	k				
PCB containing ballasts			-		
IDENTIFY AND NAME	where you dire	ect your <u>busines</u>	ses to deliver the	ese products:	
<u>Product</u>	Municipal <u>Facility</u>	Regional <u>Facility</u>	Collection Event	Curbside Collection	Private Consolidator
Fluorescent lamps					
Mercury Devices*					
TVs, computer monitors**	k				
PCB containing ballasts					
(*thermometer, thermost	ats, switches, la	ptops, etc.) (**Cathode Ray	Tube – CRT -	devices)
Report your Universal	Wastes/Merc	eury Added Pr	roducts Progra	nm efforts he	re:
Lineal feet of fluorescent l	amps collected	and shipped off	f for recycling		LF
Pounds of Mercury Contain	ning Devices co	ollected and shi	pped off for recy	cling	Lbs
Pounds of TVs, computers	& monitors, ar	nd peripherals, c	collected and shi	pped	Lbs
Pounds of PCB containing	ballasts collect	ed and shipped	for disposal		Lbs

A. Region's Recycling Website:				
B. Solid Waste (MSW) Collection Practices of Member	Communitie	es		
Municipality has Curbside Trash Pickup by Munic Municipality has Curbside Trash Pickup by Private Name of Hauler	e Hauler	Yes	No _	
Name of Hauler	Yes No on to disposa	o ıl facility:		% of total
C. How are the trash disposal costs paid for?				
Citizens Pay for Trash Disposal by Private Hauler Municipality/Region Pays for Disposal Costs Municipality Pays for Commercial Trash Disposal Businesses Pay for Commercial Trash Disposal "Pay As You Throw" program for residents	Yes Yes Yes	No No	- - -	Per Bag
D. Recycling Collection Practices of Member Commun	nities			
Municipal Curbside Collection by Municipal empl Municipal Pays for Curbside Recycling by Private Name of Hauler	oyees Hauler		No No	
Private Hauler provides Curbside Collection for Re Residential drop-off for recyclables Community/Region has Mandatory Recycling	ecyclables	Yes_	No No No	_
E. 'Household Hazardous Waste' Collection Program of Please provide total cost, vendor, participating communities				
F. Disposal Bans? Yes No Please list:				
G. Regional Solid Waste Program Expenses: \$(Please attach a copy of your program's and	Inco	me from		;: \$
H. Does the Region have a Solid Waste and/or Recyclin	ng Ordinano	ce? Yes	No _	
I. Comments: Please share any recent improvements in y future plans or concerns for your program.	our solid wa	ste and re	cycling pr	ogram. Include